

**FACT  
FILE****1**

## YOUNG ADULTS TODAY

# SUBSTANCE MISUSE AND YOUNG ADULTS IN THE CRIMINAL JUSTICE SYSTEM

Having a drug or alcohol problem seriously increases the chances of an offender committing further crimes. In 2010, 71% of poly-drug using offenders were reconvicted of an offence within a year of being discharged from custody<sup>1</sup>. The following document explores key facts and figures about substance misuse amongst young adult offenders, aged 18-24. It covers topics relating to alcohol misuse, drug misuse and smoking. The information is presented through:

- exploring the current situation for young adults who use substances
- historical trends in substance misuse
- other factors affecting or influencing substance misuse.

It also contextualises young adult offenders in the wider population by exploring similar data relating to other young adults and older offenders.

### KEY FACTS

- Drinking rates amongst 18-21 year-old male offenders have quadrupled since 1979
- Young adult offenders are less likely than older offenders to be problem drug users, or to use harder and more harmful drugs
- Drug misuse is most problematic for young adults with a mixed ethnic background and least problematic for those with an Asian background
- Smoking is over three times more common amongst offenders than in the wider population
- Unlike in the general population, smoking rates amongst offenders do not decline with age

# ALCOHOL MISUSE

## KEY FACT

In 2009, alcohol was a factor in criminal behaviour for nearly 50% of 18-24s

## CHANGES OVER TIME: YOUNG ADULT OFFENDERS

1979

8% get drunk daily  
35% weekly

1996

23% get drunk daily  
39% weekly

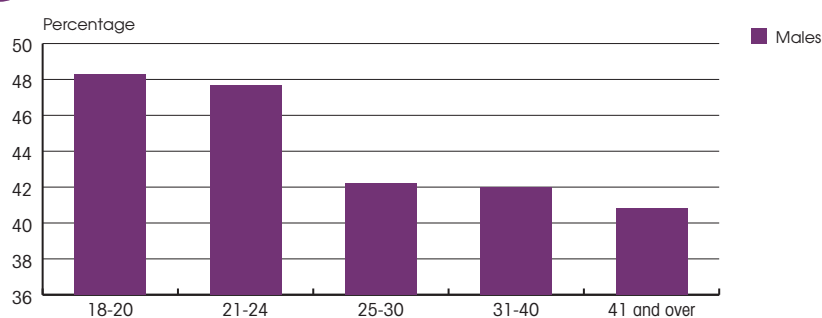
2007

40% get drunk daily  
49% weekly

Alcohol dependence and alcohol misuse are commonplace amongst offenders, and are often contributing factors in criminal activity. In 2006, data collated from the Offender Analysis System (OASys) revealed that 37% of offenders had both a problem with alcohol and/or were binge drinkers, 32% exhibited violent behavior because of their alcohol misuse and 38% had a criminogenic need relating to alcohol<sup>2</sup> i.e. alcohol was a factor in their criminal behaviour. In 2009, over a quarter of all new convictions were, at least in part, due to alcohol misuse<sup>3</sup>.

Young adult offenders are particularly likely to have a problem with alcohol. In 2001, for example, a Home Office report found that 70% (of 80) young adult offenders aged 18-21 reported hazardous or harmful alcohol use in the past year before coming to a Youth Offending Institute (YOI). In addition, 46% said that there had been weeks when they drank every day, and 14% reported drinking every day of the previous year<sup>4</sup>. And more recently, in 2009, OASys data revealed that not only had the criminogenic need relating to alcohol risen to 43.5%<sup>5</sup>, young adult offenders were in the highest risk group – see **Chart 1.1**.

**1.1** Offenders exhibiting a criminogenic need relating to alcohol in England and Wales by age, 2008

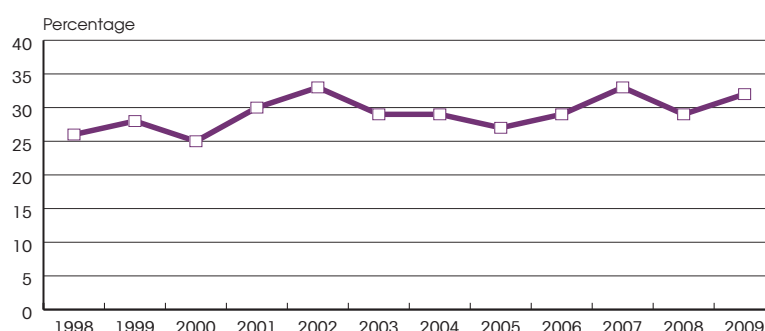


SOURCE: Ministry of Justice. (2009). A Compendium of Research and Analysis on the Offender Assessment System (OASys), 2006-2009. Ministry of Justice Research Series 16/09.

However, although young adult offenders have more problematic drinking behavior compared to their older counterparts, this is in line with age-based trends found in the wider population. Young adults, generally, are the group most likely to engage in heavy, single session drinking episodes, compared with all other 'adult' age-groups. In 2009, figures from the National Health Service showed that 32% of 16-24 year-olds reported drinking over 6/8 units (the maximum recommended level for females/males) in one drinking session in the previous week compared to just 20% of all adults<sup>6</sup>.

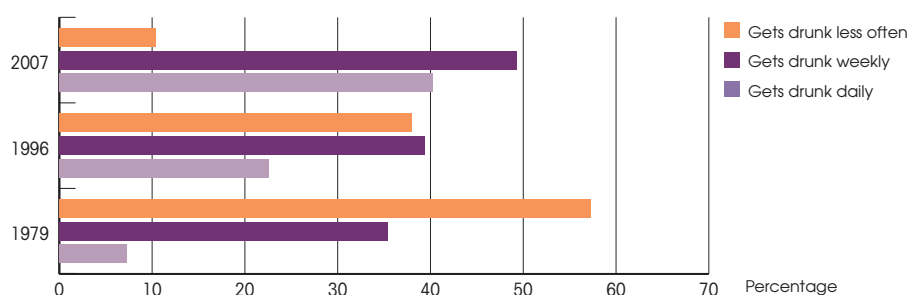
Young adult offenders also share common ground with their non-offending counterparts with regard to increases in binge-drinking rates. As **Chart 1.2** shows, binge-drinking in all young adults has seen an increase over the past decade. Although there have been rises and falls in rates suggesting different patterns at different times, the current data clearly show numerous instances where rates have increased seven and eight percentage points above the low of 25% in 2000. The same pattern can be found amongst young adult offenders. In 2009, a Scottish study conducted amongst 18-21 year-olds newly inducted to a Young Offenders Institute (YOI) over a period of three decades found that drinking rates had risen 10 percentage points from the level in 1996<sup>7</sup>.

**1.2** Rates of binge-drinking in males, 16-24, in the previous week in England, 1998-2008



SOURCE: National Health Service. (2010). Health Survey for England, 2009.

### 1.3 Drinking behaviour in young male offenders (mean age 18.5) in Scotland, 1979, 1996 and 2007



SOURCE: Scottish Prison Service (2009). Alcohol and Violence among Young Male Offenders in Scotland (1979-2009).

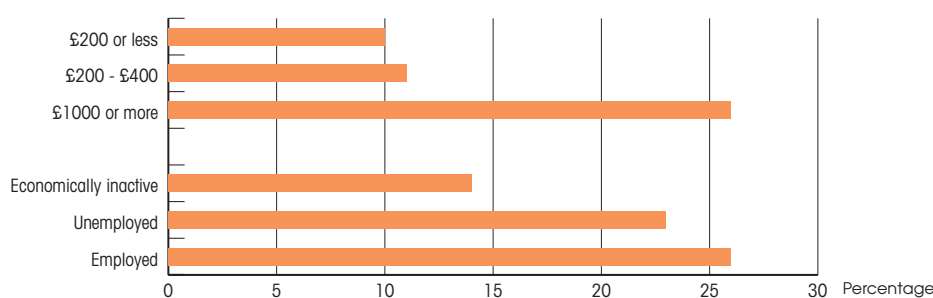
Looking at trends since the 1970s, we can see a dramatic increase in binge-drinking amongst young adult offenders. As **Chart 1.3** also shows us, nearly four times as many young men in 2007 reported being drunk daily compared to the young men in 1979. And 57% in 1979 reported being drunk less often than once a week, compared with just 10% in 2007. However, it is advisable to be cautious in drawing any specific conclusions about offenders based on this single study as the finding may also reflect national changes in increased alcohol consumption since the 1970s<sup>8</sup>.

There are also some key trends relating to ethnicity and alcohol misuse. Alcohol misuse is significantly more of a problem for offenders from a White background than for any other ethnic group. Indeed, in 2008, 48.4% of White offenders had a criminogenic need relating to alcohol, compared to 32.6% of offenders from a mixed ethnic background, 22.3% of Asian offenders and just 17.9% of Black offenders<sup>9</sup>. And in 2001, a Home Office report showed that White female offenders had higher rates of harmful drinking (37%) than either Black or mixed race female offenders (29%)<sup>10</sup>.

Offending and alcohol misuse also has a gendered relationship. For example, in the general population, just 7% of women in 2001 reported binge-drinking in the previous week<sup>11</sup>. In the 2001 Home Office study, however, it was found that 37% of women offenders (based on a sample of 102) had harmful or hazardous levels of drinking in the previous week – five times the level of women in the wider population. Although these figures are not directly comparable because of the different measurements used to define 'problem drinking', they certainly show how more prolific alcohol misuse is for women offenders than for their non-offending counterparts.

Finally, there is an interesting relationship between alcohol misuse, social and economic status, and offenders. In the general population, alcohol misuse is considerably more prevalent amongst those who are employed and those who are higher earners – see **Chart 1.4**. However, offenders, who are statistically much more likely to misuse alcohol than their non-offending counterparts, predominantly have histories of disrupted or no employment, and often come from financially disadvantaged backgrounds. This does not seem to fit the pattern found in the wider population.

### 1.4 Binge-drinking episode in the previous week by employment status and weekly earnings in England, 2009



SOURCE: National Health Service. (2010). Statistics on Alcohol: England, 2009.

#### KEY FACT

Alcohol is most problematic for White young adult offenders and least problematic for Black young adult offenders

#### KEY FACT

In 2001, 7% of all women reported weekly binge-drinking compared to 37% of women offenders

# DRUG MISUSE

## KEY FACT

In 2001, 72% of serious or prolific offenders had tried drugs compared to just 26% of non-offenders

## PROMISING PRACTICE CASE STUDY

Young Addaction Derby offers a unique 'transition' service for young adults aged 18-24 who require support for any kind of drug use. It is attuned to the drug using patterns of young adults, and also addresses their wider needs. The service is one the Transition to Adult (T2A) Alliance pilot projects.

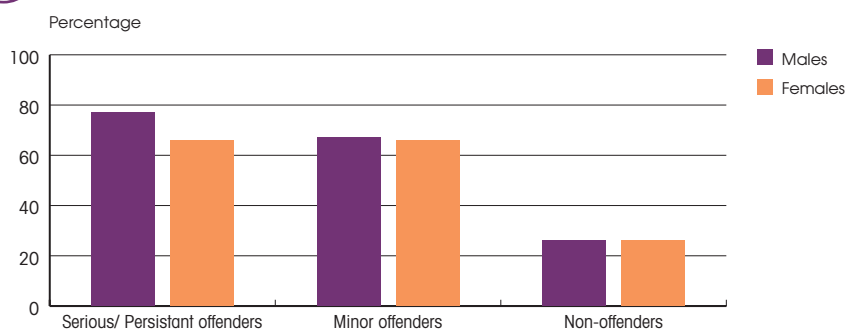
### More information:

[www.addaction.org.uk](http://www.addaction.org.uk)  
<http://youngpeopleinfocus.fastnet.co.uk/madetomeasure>

**young addaction**

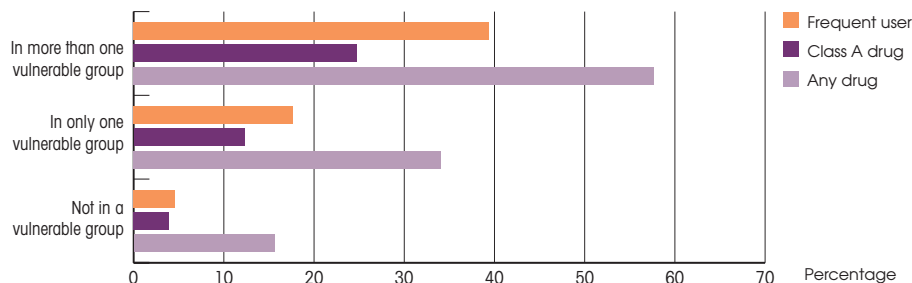
Drug misuse is also more common amongst young adult offenders than it is for young adults in the general population. For example, in the 2001 *Youth Lifestyles Survey*, based on a sample of nearly 5,000 young people aged 12-30, it was found that 77% of males and 66% of females considered serious or prolific offenders had tried drugs in their lifetime, compared with just 26% of non-offenders – see **Chart 1.5**. And as **Chart 1.6** shows, young adults who are in one or more vulnerable groups (including offenders)<sup>A</sup> are three and four times more likely to have tried drugs, tried class A drugs, and be a frequent drug user than those who are not in a vulnerable group.

### 1.5 Experience of 'ever having taken drugs' amongst 12-30 year-olds in England and Wales, 1998/1999



SOURCE: Hoare, J and Moon, D. (2010). Drug Misuse Declared: Findings from the 2009/10 British Crime Survey, England and Wales. Home Office Statistical Bulletin. Home Office.

### 1.6 Young adults, 16-24, reporting drug use in the last year in England and Wales, by whether part of a vulnerable group, 2003



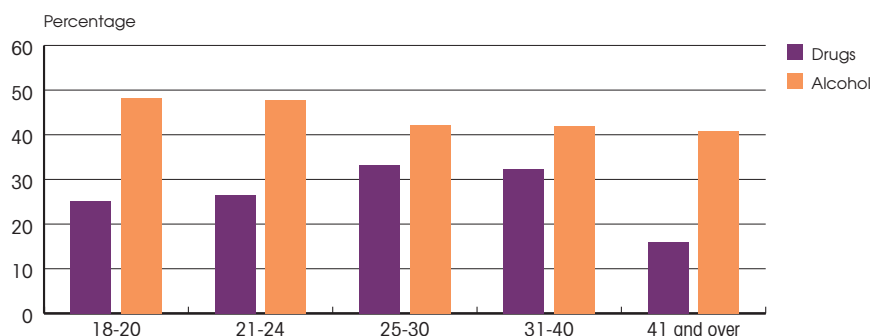
SOURCE: National Health Service. (2008). Statistics on Drug Misuse: England, 2007.

However, although drug misuse is more common amongst young adult offenders than in the general population, there is a similar age-pattern indicating that drug misuse, regardless of offending status, steadily declines with age. For example, figures from the 2009/10 British Crime Survey (BCS) show that, in the general population, 22.3% of 16-19 year-olds and 18% of 20-24 year-olds had used illicit drugs in the previous year compared to 13.3% of 25-29 year-olds, 9% of 30-34 year-olds and 5.5% of 35-40 year-olds<sup>12</sup>. Figures from the 2007 Arrestee Survey confirm this pattern amongst offenders, with 69% of newly arrested 17-24 year-olds in 2006 reporting having used drugs in the last year, compared to 67% of newly arrested 25-34 year-olds and 38% of arrestees aged 35 and over<sup>13</sup>. Interestingly, there is evidence to suggest that the criminogenic need relating to drugs is less problematic for 18-24 year-old offenders compared with older offenders – see **Chart 1.7** – but these figures do not document actual incidents of drug misuse in the concrete way the Arrestee Survey does.

Although young adult offenders are more likely to take drugs than their older counterparts, the severity of the drug taking often shows a different pattern. According to a 2010 report by the Department of Health looking at people accessing drug treatment services, (a sample

A. In this instance, the report authors clarify that vulnerable groups are classed as those who have ever been in care, homeless, truants, excludeds from school and offenders

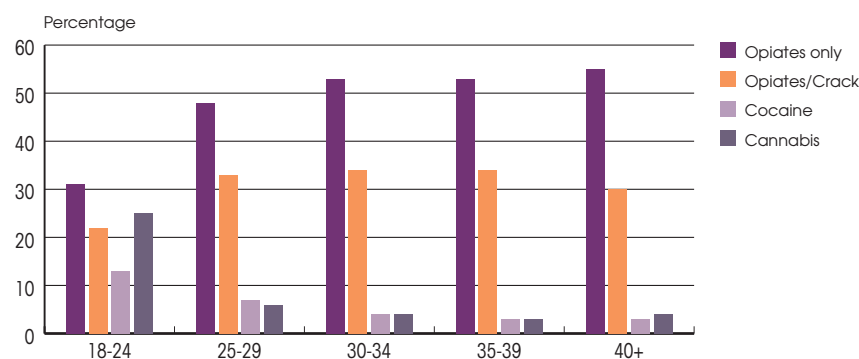
### 1.7 Drug and alcohol criminogenic need prevalence rates in England and Wales by age, 2008



SOURCE: Ministry of Justice. (2009). A Compendium of Research and Analysis on the Offender Assessment System (OASys), 2006-2009. Ministry of Justice Research Series 16/09.

comprising over 30% offenders), young adults, 18-24, were found to be the least likely group to be classed as a Problem Drug User (PDU) – 57%, compared with 84% of 25-29 year-olds, 89% of 30-34 year-olds and 90% of 35-40 year-olds<sup>14</sup>. They were also the least likely group to be in treatment for drug misuse – just 13% of the sample consisted of 18-24 year-olds, compared with 19% who were 35-39 years-old, 22% who were 30-34, and 26% who were over 40<sup>15</sup>. The report also indicated that not only were young adults the least problematic in their usage, they were also less likely than older adults to be in treatment for harder drugs such as opiates and/or crack – see **Chart 1.8**. In addition, in 2008, results from a national survey looking at the problems and needs of newly sentenced prisoners found that a greater proportion of adult offenders (aged 21 and over) reported using heroin, non-prescribed methadone or tranquilizers, and crack cocaine, whereas offenders aged 18-20 years old were more likely to report usage of cannabis, cocaine powder and ecstasy<sup>16</sup>.

### 1.8 Trends in primary drug usage amongst people receiving treatment for drug misuse in England by age, 2008/09



SOURCE: Department of Health. (2010). Statistics from the National Drug Treatment Monitoring System (NDTMS), 1 April 2009 – 31 March 2010.

Despite young adults being the most prolific users of drugs, rates have significantly declined over the last 15 years. Indeed, the 2009/10 BCS survey revealed that in 1998 over 30% of 16-24 year-olds reported having used drugs in the previous year compared with 26% in 2004/05 and 20% in 2009/10. This effect is also seen amongst young adult offenders. Indeed, figures from the 2007 Arrestee Survey indicated that 74% of young adult offenders, aged 17-24, had taken drugs in the last year (2003/04); 71% had taken drugs in 2004/05; and 69% in 2005/06.

There are some differences between ethnic groups in relation to substance misuse. Data from 2008 show that offenders with a mixed ethnic background are the most likely group to have a criminogenic need relating to drugs – 34.5%, compared to 29% of Black people, 28.5% of White people and 21.3% of Asian people<sup>17</sup>. These results closely match the pattern found in the 2007 Arrestee Survey, where it was discovered that 64% of people from mixed ethnic groups had taken drugs in the previous month compared with 53% of White, 52% of Black and 40% of Asian groups<sup>18</sup>.

## CHANGES OVER TIME: YOUNG ADULT OFFENDERS

**2003/04**

74% taken illicit drugs in the previous year

**2004/05**

71% taken illicit drugs in the previous year

**2005/06**

69% taken illicit drugs in the previous year



In terms of gender, men are considerably more likely to misuse drugs than women. In 2006/07, 13.2% of men compared with 6.9% of women had used drugs in the past year<sup>19</sup>. And in 2009, data on all deaths due to drug poisoning in England and Wales showed that there were 1,512 deaths from drug abuse amongst males compared with 364 amongst females<sup>20</sup>.

The relationship between drug misuse and socio-economic status (SES) is in direct contrast to that of alcohol misuse and SES, with drug usage being most common amongst lower earners and those who are unemployed. In 2003/04, those on salaries of less than £5,000 were the most likely to have taken drugs in the past year (15.4%), with those on salaries of £20,000-£30,000 proving the least likely group to take drugs (9.9%). Further, when looking at employment status, the picture is even more pronounced – 23.5% of unemployed people took drugs in the previous year compared with 11.8% of those in employment<sup>21</sup>.

## SMOKING

### CHANGES OVER TIME: YOUNG ADULT OFFENDERS

**1997**

over 80%  
are smokers

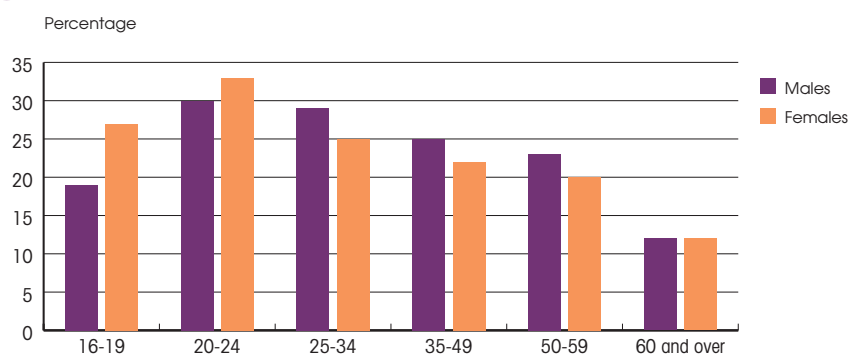
**2008**

Still over  
80% are smokers

Smoking is over three times more prevalent amongst offenders than in the overall population. In 1997, the Office for National Statistics found that over 80% of offenders in England and Wales were regular smokers<sup>22</sup>. And in 2002, a study looking into psychosis and drug dependence amongst prisoners found that 83% of the sample population identified themselves as a regular smoker<sup>23</sup>. By comparison, smoking rates in the general population in 1997 and 2002 were 28% and 26% respectively<sup>24</sup>. And more recently, in 2008, a survey conducted amongst offenders on probation in Nottinghamshire and Derbyshire, found that over 83% identified themselves as regular smokers<sup>25</sup>. The 2008 national average for smokers was just 22%<sup>26</sup>.

Unlike the pattern found in the general population, smoking tends to be a lifelong habit for those with a history of offending. As we can see from **Chart 1.9**, smoking in the general population peaks between 20 and 24 years of age and then steadily declines with age. However, amongst offenders, rates remain consistently high across all age-groups. For example, a 2006 Scottish NHS study showed that nearly 80% of 16-24 year-olds in prison identified themselves as a smoker<sup>27</sup>. And another study in 2004 looking at substance misuse amongst young offenders found that 84% were regular smokers at the time of their arrest<sup>28</sup>. In both cases, figures clearly echo the 80% average smoking rate for *all* offenders.

**1.9** Prevalence of cigarette smoking amongst adults, 16 and over, in England by gender and age, 2008



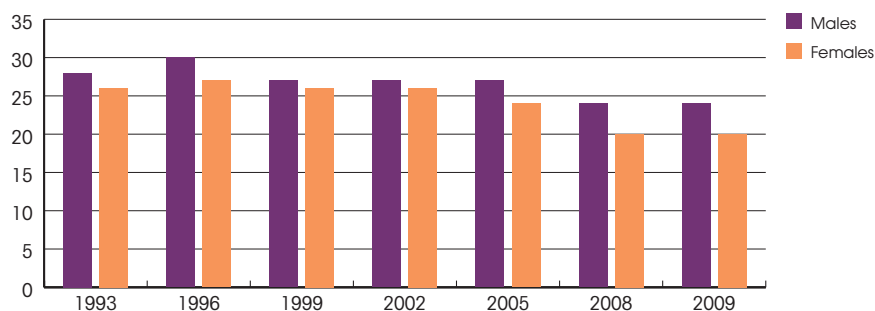
SOURCE: National Health Service. (2010). Statistics on Smoking: England, 2010.

There are also some noteworthy gender trends. As **Chart 1.10** shows, in the general population, men have consistently higher rates of smoking than women. However, this is not the case for offenders. In 2006, Oxford University researchers found that 85% of women in prison described themselves as smokers<sup>29</sup>, and in the 1997 ONS survey, up to 83% of women said they regularly smoked. This is directly comparable with the smoking rates found amongst male offenders, which were between 78-85%, in 1997.

Smoking and a socio-economic status has a very strong relationship. In 2008, 29% of people with routine and manual jobs were smokers compared to 14% in managerial and professional jobs. Further, smokers who have routine or manual jobs tend to smoke more

### 1.10 Smoking rates in England by gender, 1993-2008

Percentage



SOURCE: National Health Service. (2010). Health Survey for England, 2009.

#### KEY FACT

Smoking rates in the general population have declined since 1997, but not amongst those in prison

heavily than those in managerial or professional jobs – 14.2 cigarettes a day and 11.2 cigarettes a day respectively<sup>30</sup>. As offenders tend to have lower levels of education and are likely to have less professional and managerial jobs<sup>31</sup>, this finding is consistent with the pattern.

There is also evidence to suggest that young adult offenders are at an even greater risk for smoking due to their domiciliary circumstances i.e. whether they are living in or out of prison. Indeed, though there has been a demonstrable decline in smoking rates over the past decade within the general population, particularly amongst young adults, this has not been the case amongst those in prison<sup>32</sup>. This may also be related to the fact that, although national smoking rates have fallen since the smoking ban in 2007, UK based prisons have largely remained a smoke-friendly environment, with only one UK prison currently revising protocol to introduce a smoke-free policy<sup>3</sup>.

B. Isle of Man, Prison.

## POINTS FOR POLICY: YOUNG ADULT OFFENDERS AND SUBSTANCE MISUSE

This factsheet shows that alcohol misuse, drug misuse and smoking are significantly more common amongst young adult offenders than in the general population, and that alcohol and drug use, in particular, have significant associations with offending. It is also notable that drug use becomes even more problematic for offenders after they pass through young adulthood (ages 18-24). This means that:

- Tackling substance misuse during young adulthood will not only result in major health benefits for individuals, it will also have an important impact on offending and re-offending.
- Adult substance misuse treatment services need to be attuned to the specific needs of young adults, and their substance misuse patterns, which are different from those of older adults. Better links between adult and youth substance misuse services would help.
- There are clear associations between lower socio-economic status (SES) and drug misuse. Improving employment prospects will help break the cycle of drug use and offending.
- High smoking rates amongst young adult offenders should not be overlooked given the long-term negative impact this will have on an individual's health.
- Services for young offenders with substance misuse problems need to be alert to issues related to gender and ethnicity.

## REFERENCES

- <sup>1</sup> Ministry of Justice. (2010). *Compendium of Reoffending Statistics and Analysis*. Statistical Bulletin, November 2010.
- <sup>2</sup> National Offender Management Service. (2006). *Working with Alcohol Misusing Offenders – A Strategy for Delivery*.
- <sup>3</sup> Ministry of Justice. (2009). *A Compendium of Research and Analysis on the Offender Assessment System (OASys), 2006-2009*. Ministry of Justice. Research Series 16/09. December 2009.
- <sup>4</sup> Home Office. (2003). *Differential Substance Misuse Treatment Needs of Women, Ethnic Minorities and Young Offenders in Prison: Prevalence of Substance Misuse and Treatment Needs*. Home Office Online Report 33/03.
- <sup>5</sup> Ministry of Justice. (2009). Op. Cit.
- <sup>6</sup> National Health Service. (2010). *Health Survey for England, 2009*.
- <sup>7</sup> Scottish Prison Service (2009). *Alcohol and Violence Among Young Male Offenders in Scotland (1979-2009)*. January 2009.
- <sup>8</sup> Smith, L. and Foxcroft, D. (2009). *Drinking in the UK: An Exploration of Trends*. Joseph Rowntree Foundation.
- <sup>9</sup> Ministry of Justice. (2009). Op. Cit.
- <sup>10</sup> Home Office. (2003). Op. Cit.
- <sup>11</sup> National Health Service. (2010). Op. Cit.
- <sup>12</sup> Hoare, J. and Moon, D. (2010). *Drug Misuse Declared: Findings from the 2009/10 British Crime Survey, England and Wales*. Home Office Statistical Bulletin 13/10. July 2010.
- <sup>13</sup> Boreham, R. Cronberg, A. Dollin, L. Pudney, S. (2007). *The Arrestee Survey 2003-2006*. Home Office.
- <sup>14</sup> National Health Service. (2010). *Statistics from the National Drug Treatment Monitoring System (NDTMS): 1 April 2009 – 31 March 2010*.
- <sup>15</sup> National Health Service. (2011). *Statistics on Drug Misuse, England, 2010*.
- <sup>16</sup> Ministry of Justice. (2008). *The Problems and Needs of Newly Sentenced Prisoners: Results from a National Survey*. Ministry of Justice. Research Series 16/08, October 2008.
- <sup>17</sup> Ministry of Justice. (2009). Op. Cit.
- <sup>18</sup> Boreham, R. Cronberg, A. Dollin, L. Pudney, S. (2007). Op. Cit.
- <sup>19</sup> National Health Service. (2008). *Statistics on Drug Misuse: England, 2008*.
- <sup>20</sup> Office for National Statistics. (2010). *Deaths Related to Drug Poisoning in England and Wales, 2009*.
- <sup>21</sup> National Health Service. (2008). *Statistics on Drug Misuse: England, 2008*.
- <sup>22</sup> Singleton, N. Farrell, M. and Meltzer, H. (1999). *Substance Misuse Among Prisoners in England and Wales*. Office for National Statistics.
- <sup>23</sup> Farrell, M. Bebbington, P. Brugha, T. Coid, J. Jenkins, R. Lewis, G. Meltzer, H. Marsden, J. Singleton, N. and Taylor, C. (2002). *Psychosis and Drug Dependence: Results from a National Survey of Prisoners*. *The British Journal of Psychiatry*. Vol. 181: 393-398.
- <sup>24</sup> National Health Service. (2010). Op. Cit.
- <sup>25</sup> Brooker, C. Fox, C. Barrett, P. and Syson-Nibbs, L. (2008). *A Health Needs Assessments of Offenders on Probation Caseloads: In Nottinghamshire and Derbyshire*. University of Lincoln.
- <sup>26</sup> National Health Service. (2010). Op. Cit.
- <sup>27</sup> Taulbut, M. and Gordon, D. (2008). *Young Adult Smokers in Scotland*. NHS Health Scotland. December 2008.
- <sup>28</sup> Youth Justice Board. (2004). *Substance Misuse and Juvenile Offenders*.
- <sup>29</sup> Plugge, E. Douglas, N. and Fitzpatrick, R. (2006). *The Health of Women in Prison Study Findings*. University of Oxford.
- <sup>30</sup> National Health Service. (2010). Op. Cit.
- <sup>31</sup> Devitt, K. Knighton, L. and Lowe, K. (2009). *Young Adults Today*. Young People in Focus.
- <sup>32</sup> Hartwig, C. Stöver, H. and Weilandt, C. (2008). *Report on Tobacco Smoking in Prison*. University of Bremen.



Young People in Focus (YPF) helps individuals and organisations working with young people and families to provide better services by:

- carrying out research and evaluating services
- running projects that develop professional practice
- producing practical resources such as guides, toolkits and training packs
- training professionals in a range of topics
- influencing policy-makers.

YPF works across the UK and covers: health and emotional wellbeing; learning and education; parenting and family life; youth social action and participation; youth justice.

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Devitt, K. (2011). *Young Adults Today: Substance Misuse and Young Adults in the Criminal Justice System Fact File*. Young People in Focus. Brighton.



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The T2A Alliance (convened by the Barrow Cadbury Trust) is a broad coalition of organisations and individuals working to improve the opportunities and life chances of young people in their transition to adulthood, who are at risk of committing crime and falling into the criminal justice system. The T2A Alliance aims to raise awareness of the problems this group face and to secure policy change to improve their lives.

[www.t2a.org.uk/alliance](http://www.t2a.org.uk/alliance)